

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)		TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel, please use Form CJA24</i> Please read instructions on next page.															
1a. CONTACT PERSON FOR THIS ORDER Robin Pezzimenti		2a. CONTACT PHONE NUMBER (650) 493-9300		3. CONTACT EMAIL ADDRESS rpezimenti@wsgr.com													
1b. ATTORNEY NAME (if different) Maura Rees		2b. ATTORNEY PHONE NUMBER (650) 320-4780		3. ATTORNEY EMAIL ADDRESS mrees@wsgr.com													
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Wilson Sonsini Goodrich & Rosati, 650 Page Mill Rd., Palo Alto, CA		5. CASE NAME In re Google Plus Profile Litigation		6. CASE NUMBER 5:18-cv-06164													
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input checked="" type="checkbox"/> FTR Irene Rodriguez		8. THIS TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL		9. TRANSCRIPT ORDER IS FOR: <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) CJA: Do not use this form: use Form CJA24.													
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:		b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.) c. DELIVERY TYPE (Choose one per line)															
a. HEARING(S) (OR PORTIONS OF HEARINGS)		DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
11/19/2020	EJD	Settle				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
01/07/2021	EJD	Fees				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>							
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10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:																	
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE <i>/s/ Maura Rees</i>																	
12. DATE 02/25/2021																	